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TELEFAX

Date: December 22, 2004

Total pages: 24
(incl. cover sheet)

To: US PTO

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From: Patrea L. Pabst

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Our Docket No. NPA 100
Your Docket No.

Client/Matter No. 092583-00004

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MESSAGE:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Bernhard A. Sabel and Ulrike Schroeder

Serial No.: 09/445,439

Art Unit: 1616

Filed: February 23, 2000

Examiner: Michael G. Hartley

For: DRUG TARGETING SYSTEM, METHOD OF ITS PREPARATION AND USE

(45048193.1)

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PTO/SB/21 (09-04)

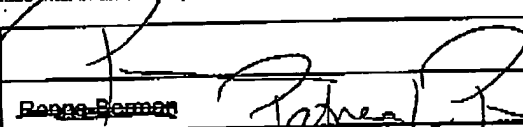
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/445,439
	Filing Date	February 23, 2000
	First Named Inventor	Bernhard A. Sabel
	Art Unit	1616
	Examiner Name	Michael G. Hartley
	Attorney Docket Number	NPA 100
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Pabst Patent Group LLP		
Signature			
Printed name	Patrea L. Pabst		
Date	December 22, 2004	Reg. No.	31,284

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Patrea L. Pabst	Date	December 22, 2004

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 475.00**Complete If Known**

Application Number	09/445,439
Filing Date	February 23, 2000
First Named Inventor	Bernhard A. Sabel
Examiner Name	Michael G. Hartley
Art Unit	1616
Attorney Docket No.	NPA 100

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
26 - 26 or HP = 0	x					
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
2 - 3 or HP = 0	x					
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		
				Fees Paid (\$)

4. OTHER FEE(S)

Non-English Specification \$130 fee (no small entity discount)

Other: Petition for Extension of Time (two months); Notice of Appeal

475.00

SUBMITTED BY

Signature

Registration No.
(Attorney/Agent)

31,284

Telephone (404) 879-2151

Name (Print/Type)

Patrea L. Pabst

Date December 22, 2004

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